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TO: Commissioner of Patents
FAX NO.: 703-872-9306
FROM: Eamon J. Wall/TV
DATE: June 15, 2004
MATTER: Serial No. 09/782,098 Filed: 2/13/01
DOCKET NO.: Moeller 9-12
APPLICANT: Moeller

The following has been received in the U.S. Patent and Trademark Office on the date of this facsimile:

☐ Petition
☐ Disclosure Statement & PTO-1449
☒ 1.132 Declaration
☒ Amendment - 29 pages

☒ Transmittal Letter (2 copies)
☐ Fee Transmittal (2 copies)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/782,098
	Filing Date	2/13/01
	First Named Inventor	Moeller
	Group Art Unit	2833
	Examiner Name	Nathan M. Curs
Total Number of Pages in This Submission	Attorney Docket Number	Moeller 9-12

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response – 29 pages <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1.132 Declaration
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Eamon J. Wall, Reg. No. 39,414 Moser, Patterson & Sheridan, LLP		
Signature	<i>E. J. Wall</i>		
Date	6/15/04		

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